

Effect of Public Law 779 On Teaching and Research At Public Health Schools

By W. H. AUFRANC, M.D., and
WILLIAM P. SHEPARD, M.D.

For the majority of persons serving in understaffed health departments and directly concerned with meeting day-to-day public health needs in their communities, the recently published paper (1) on health department manpower shortages was probably far from startling when it revealed that budgeted vacancies amounted to 20 percent for physicians, 9 percent for nurses, and 14 percent for sanitary engineers. But by presenting clearly and concretely the staffing deficiencies in State and local public health departments, a real need has been fulfilled by this study which was sponsored by the Health Resources Advisory Committee of the Office of Defense Mobilization and conducted by the Public Health Service. Now that the nature and scope of the problem have been specifically delineated, the deficits of trained personnel in health departments will receive the attention and interest of many more agencies and individuals at local, State, and national levels.

The reported deficits of physicians and nurses offer an incentive for medical and nursing schools to place more emphasis on public health in their curriculums and in their counseling programs. The same holds true for other categories of personnel.

Partly as a result of the findings in the study

Dr. Aufranc, formerly assistant chief of the Division of Venereal Disease, Public Health Service, is now director of the Health Resources Staff and Dr. Shepard is a member of the Health Resources Advisory Committee, Office of Defense Mobilization. This paper is adapted from remarks given by Dr. Shepard at the 80th annual meeting of the American Public Health Association in Cleveland, 1952.

Public Law 779

Public Law 779, a 1950 amendment to the 1948 Selective Service Act, required registration of all men under 50 years of age in medical, dental, and allied specialist categories, if they were not members of a reserve component of the Armed Forces.

Priority I. Men who pursued their professional education either through occupational deferment or through participation in the specialized training programs of the Army or Navy and had less than 90 days of subsequent military service.

Priority II. Same groups as I, under the same conditions, who had 90 days or more but less than 21 months of subsequent active duty.

Priority III. Men in the specified categories with no active duty since September 16, 1940.

Priority IV. Veterans not covered by priorities I and II.

of manpower in health departments, the Health Resources Advisory Committee surveyed for a second time the faculties of schools of public health to appraise the impacts of Public Law 779 on their teaching and research programs. The information available for 1950-51 and 1952-53 is now being used by the State and local advisory committees to the Selective Service System in determining the essentiality and availability of individual physicians. The data will also serve as a benchmark in staffing and will be useful for mobilization and other planning to meet public health needs.

Findings

For an enrollment of approximately 800 graduate students, the 10 approved schools of public health in the United States reported a faculty of 467 teachers and research workers at the start of the 1952-53 school year. This complement represented a slight reduction from the 488 reported for 1950-51; however, at least a part of the decrease is due to a difference between the 2 years in the definition of faculty members to be included. Some schools, for example, excluded from their 1952-53 reports occasional lecturers who had been included in their 1950-51 reports (table 1).

Table 1. Faculty members at schools of public health, by profession, 1950-51 and 1952-53

Profession	Year of report	
	1950-51	1952-53
Total.....	488	467
Physicians.....	187	179
Dentists.....	2	-----
Veterinarians.....	2	1
Others.....	297	287

To get a more accurate measure of teaching programs in schools of public health than total numbers of faculty members, the Health Resources Advisory Committee in their 1952-53 survey asked the total number of teaching hours for those faculty members with teaching assignments. The reports showed about 84 percent of the faculty members held teaching assignments with some of them devoting as many as 1,000 hours per year. The remaining 15 percent of the faculty members were engaged exclusively in research (table 2).

Since almost all the faculty members with teaching assignments devote a considerable portion of their time to research and community services, the typical teaching schedule of formal classroom time was relatively low. About 46 percent of the faculty members with teaching

assignments reported less than 200 annual hours of formal classroom instruction. When all 10 schools are grouped, the total hours of formal classroom instruction on an overall basis amounted to 145,000 hours or about 150 to 200 hours per student a year. The individual schools, however, showed marked variations from this overall average, probably because they differed so much from one another by type of enrollment.

An analysis of the classroom teaching hours by academic title and age revealed that most instruction is provided by faculty members with the academic title of associate or assistant professor and that, in general, younger faculty members carry the heaviest teaching schedules.

The percentage of total classroom teaching time contributed in 1952-53 by faculty members according to academic title is given below:

	<i>Percent time</i>
Professors.....	23.6
Associate and assistant professors.....	42.3
Associates and assistants.....	11.1
Instructors.....	8.7
Visiting lecturers.....	9.0
Others.....	5.3

Following are the average annual hours of classroom teaching time contributed by faculty members in each age group:

<i>Age group</i>	<i>Average annual hours</i>
20-29.....	426
30-39.....	379
40-49.....	366
50 plus.....	304

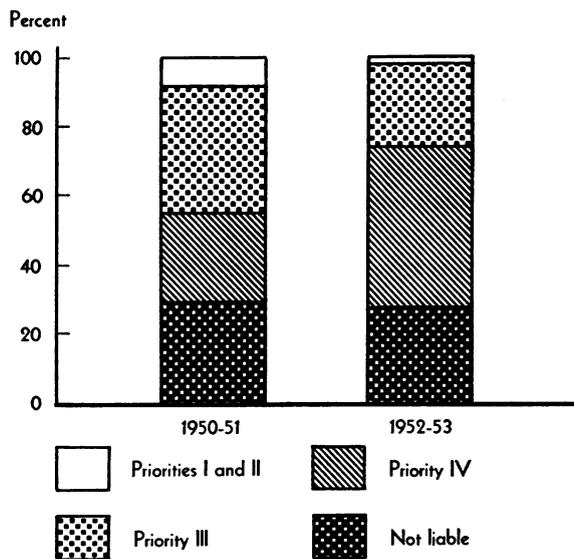
Table 2. Total annual classroom teaching hours of faculty members at schools of public health, 1952-53

Annual hours	Total	Physicians	Nurses	Others
Total.....	467	179	22	266
No teaching.....	71	17	1	53
Under 100.....	105	52	2	51
100-199.....	70	30	5	35
200-299.....	42	17	2	23
300-399.....	44	19	5	20
400-499.....	30	17	1	12
500-599.....	10	6	-----	4
600-699.....	17	4	1	12
700-799.....	8	5	-----	3
800-899.....	5	2	-----	3
900-999.....	5	-----	-----	5
1,000 and over.....	41	6	1	34
Unknown.....	19	4	4	11

Roughly one-third of the total teaching time in schools of public health during 1952-53 was provided by faculty members in professions covered by Public Law 779. Accordingly, it is especially important for the schools to consider carefully the military liability of these individuals in making faculty appointments. In general, the surveys of the Health Resources Advisory Committee show that they have done this. As a result, they are in a much better position today than they were in 1950-51 (see chart).

As expected, the proportion of men in the first two priorities under Public Law 779 is markedly lower at present than in 1950-51. In

Military liability of faculty members covered by Public Law 779 at schools of public health, 1950-51 and 1952-53



NOTE: Included in the "not liable" group are men over 50 years of age, women, and aliens.

the near future, all men in the first two priorities will have been called for military service, and men with no previous military service, those in priority III, will become liable. On an overall basis, although the picture may be quite different from the viewpoint of the individual schools, the faculty members in priority III contributed 9 percent of the total teaching hours. Men in priority III will be called according to age with the youngest first. It is doubtful if those in the extreme upper-age groups will ever be called at present mobiliza-

tion levels since more and more of the newly graduated physicians are nonveterans and, therefore, will be registered in priority III. The age distribution of the priority III physicians on faculties at schools of public health follows:

Age group	Percent physicians
Under 35	12.5
35-39	20.0
40-44	30.0
45 plus	37.5

Conclusion

The surveys of the Health Resources Advisory Committee show that schools of public health depend on individuals in professions covered by Public Law 779 for more than one-third of their total faculty members. It is, therefore, extremely important for them to follow closely the scheduling of military liability under the law. A comparison of 1950-51 data with 1952-53 information shows that, in general, they have done this. Priority III, the next group in line for military service, at schools of public health contribute roughly 9 percent of the total teaching time. Schools with priority III faculty members in the younger age groups should prepare to obtain replacements now to avoid disruption at a later date.

REFERENCE

- (1) Shepard, W. P: Manpower shortages in official health agencies. Pub. Health Rep. 67: 709-724 (1952).

